



**John Dowler B.Sc. Hons, NPQH**  
**Headteacher**

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20 June 2017

Dear Parent/Carer

### **Chemistry Pharmaceutical Day, School of Chemistry, Bangor University**

Your son/daughter has the opportunity to take part in a Chemistry Pharmaceutical Day at Bangor University on **Tuesday 4 July 2017**.

This is a great opportunity to experience a university laboratory and learn about instrumental techniques that are part of the A level course but not available in school.

We will be travelling by train to Bangor Station from Helsby Station on the **8:41am train**. The university is a short walk from the station. Please can you make arrangements for your son/daughter to be at Helsby Station for **8:30am**.

We will leave Bangor on the **15:04pm train** to arrive back in Helsby Station by 16:30pm. Please can you ensure that appropriate arrangements are made for your son/daughter to get home from Helsby Station.

The event is sponsored by Bangor University so is of no cost to students. However, the return train ticket is £20 payable on the day.

Students need to bring a packed lunch with them, however tea, coffee and juice will be provided.

As the day involves an extensive laboratory session, students should be dressed appropriately e.g. no open toe shoes. I will take student's lab coats and safety glasses from school.

It would be helpful if you would let me know whether you would like your son/daughter to participate by completing and returning the slip below to Mrs E Dawson no later than **Wednesday 28 June**.

Yours sincerely

E Dawson (Mrs)  
Department Leader for Chemistry



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PLEASE RETURN REPLY SLIP TO Mrs E DAWSON by Wednesday 28 June.

NAME OF TRIP: Chemistry Pharmaceutical Day DATE: Tuesday 4 July 2017

Name of Student: ..... Form: .....

I do/do not give my permission for my son / daughter to attend the above trip and agree to pay the cost of £20 for their train ticket.

I have made provision for my son / daughter to be dropped off & collected from Helsby Station.

Emergency Contact No: .....Home Tel No: .....

Medical Information (include any allergies e.g. latex or currently prescribed medication):
.....
.....

Signed: .....(Parent / Carer) Date: .....

If a student has asthma, can parents/carers please make sure that their son/daughter has their inhaler with them for the visit.